

talking about them. I think by reading letters from citizens in Ohio and what they are wrestling with every day, it brings this back down to a level that we need to think of more often when we debate these issues, and that is that every single day, of those 14,000 people who are losing their health insurance, there are many who do confront a health care crisis and lack the ability to respond to it other than showing up in an emergency room or hoping there will be free health care for them because they do not have the capacity to pay for it.

So I appreciate tremendously Senator BROWN's contribution, not only during those long days we spent day in and day out crafting the legislation that is now before us, but now, when we need to do more talking about what is in that bill. Because from a small business perspective, as well as the insured, the prevention, the quality of care, or workforce issues, they are all very significant contributions to our debate.

The Class Act, which allows individual people, at no government expense, to contribute to their own long-term care needs is one of the most innovative and creative ideas in our bill. That will provide not only substantial resources, but the ability of people to lead independent lives who have disabilities under what might otherwise force them to live under more expensive care or tapping into Medicare. In fact, the projections under the Congressional Budget Office is that we have saved \$2 billion in Medicare costs just by having the Class Act—that is the long-term care provisions in the bill.

I invite all my colleagues to read the bill and to go to the briefings. I spent a little more than an hour today with my colleague from California, DIANNE FEINSTEIN, who requested that I come by with staff, with her staff, and go through the various sections of the bill and how it would work; how it would affect people in their State; how these various provisions would work.

I don't want to speak for her, but I think she was pleased to hear what we had done. Obviously, there is more to be done out of the Finance Committee, and I don't have answers for that because there is no bill out of the Finance Committee as yet, but on the part of the effort we have made, as our Members and colleagues look at what we have done, I think they will be pleasantly pleased about the efforts we have made to assist the insured with preexisting conditions, the caps, as I have mentioned, the credits we provide to small businesses to allow them to make that health care insurance available to their employees—as many would like to be able to do—at a cost they can afford, without crippling them because one employee ends up with a serious health condition thus raising the cost of every other employee and the cost of overall health care. That is gone as a result of what we have written in our legislation.

So I urge my colleagues to read the bill, to talk with us, to raise the questions you have, particularly over these weeks between now and the time we come back. I think you will again be pleased at the effort our colleagues have made to vastly improve the status quo and, I think, contribute significantly to where we need to be going with regard to health care reform.

So I am very grateful to Senator SHERROD BROWN of Ohio for his contribution.

Mr. President, I yield the floor.

HONORING OUR ARMED FORCES

LIEUTENANT BRIAN N. BRADSHAW

Mr. CHAMBLISS. Mr. President, I rise today to honor the life and selfless commitment of LT Brian N. Bradshaw to the U.S. Army and to our Nation.

Lieutenant Bradshaw died as a result of an improvised explosive device on June 25 in Kheyl, Afghanistan. He was 24 years old.

Coincidentally, Lieutenant Bradshaw's life was taken the same day that pop star Michael Jackson died. A Google News search reveals that the number of news stories in the past month filed about Michael Jackson is 142,929, the number filed about Lieutenant Bradshaw? Twenty-six.

It is time the American people know a bit more about this young man who sacrificed for his country his life, his family, and all his potential, giving up all he had and all he was going to be.

In his youth, Lieutenant Bradshaw served his community in Steilacoom, WA, as a search-and-rescue volunteer, as an altar boy, and as a summer camp counselor. Family and friends describe him as a man with "a wry sense of humor" and a deep love for American history.

He graduated from Pacific Lutheran University in the spring of 2007 and joined the Army and began service in Afghanistan in March of 2009. As a member of the U.S. Army, Lieutenant Bradshaw served in the 1st Battalion, 501st Parachute Infantry Regiment, 4th Airborne Brigade Combat Team, 25th Infantry Division, and was stationed at Fort Richardson, AK.

Described as a man who found more meaning in actions than words, it is no surprise that Lieutenant Bradshaw found meaning in his service in Operation Enduring Freedom. In the course of his deployment, he sought to help the less fortunate people of Afghanistan and to improve life for the children there, frequently writing home for packages of gifts to give to local children.

Lieutenant Bradshaw found his voice in the honor and patriotism of the Army. With a father who is a retired National Guard helicopter pilot and a mother who is a retired Army nurse, Lieutenant Bradshaw was a man with the military in his blood.

Thus, it is only fitting the transfer of his remains on June 25 to Bagram Air Force Base was carried out in a cere-

mony of honor and patriotism that typifies the ideals of the U.S. Armed Forces.

Sent to retrieve Lieutenant Bradshaw's body were members of the Air National Guard from my home State of Georgia. On their sad mission, they landed their C-130 using night-vision goggles in blackout conditions. What appeared to be hundreds of his fellow soldiers in his company stood in formation in the dark as Lieutenant Bradshaw's body was carried aboard the plane.

In a letter to Lieutenant Bradshaw's family, CPT James Adair and MSG Paul Riley of the Georgia Air National Guard, who were present at the ceremony, described the experience:

Everyone we talked to spoke well of him—his character, his accomplishments and how well they liked him. Before closing up the back of the aircraft, one of Brian's men, with tears running down his face, said, "That's my platoon leader, please take care of him."

The world may have been occupied with other things, the media with other stories. But for one brief moment, the war stopped to honor LT Brian Bradshaw.

Mr. President, it is my honor and privilege today to pay tribute to Lieutenant Bradshaw, who illustrates the commitment to excellence, honor, and courage that exemplifies our Nation. It is thanks to citizens such as him that America has been and will continue to be a great and free Nation.

HEALTH CARE REFORM

Mr. REID. Mr. President, we have come so very far.

But there are some who think we should scrap everything we have accomplished and go back to square one. The truth is that throwing out all the great work we have done until now would be a terrible waste of time, energy and hard work.

There are some who do not think now is the right time to reform health care. In reality, for many who feel that way, there will never be a good time to reform health care.

It is easy to talk only about the part of the road we have yet to cover. As any parent knows, for some, the only question is, "Are we there yet?"

But it would be a mistake not to also acknowledge and appreciate the great distance we have traveled.

For generations, we have been working to fix our broken health care system. This has been the No. 1 issue on our agenda for a long time now. Throughout this year alone, we have explored numerous proposals in numerous bipartisan roundtables, committee hearings and constituent meetings.

Harry Truman recognized long ago that we must do more to make it easier to live a healthy life in America. Shortly after the Second World War, he lamented the fact that millions of our own lack "a full measure of opportunity to achieve and enjoy good health." He knew it was wrong that

Americans had no security against what he called “the economic effects of sickness.”

Truman knew in 1945 that “the time has arrived for action to help them attain that opportunity and that protection.”

Senator KENNEDY—the man who, more than any other, has dedicated his life to our fight for fair health care—echoed Truman’s call. He said:

One of the most shameful things about modern America is that in our unbelievably rich land, the quality of health care available to many of our people is unbelievably poor, and the cost is unbelievably high.

Senator KENNEDY did not give this speech last month, though it would have been very timely if he had. He did not give it last year, though it would have been equally relevant and true. He did not even give it last decade, or the decade before that.

It was in 1978 when Senator KENNEDY decried our shameful system. Yet his words and his cause are as urgent today as ever. In fact, since then our need for reform has gotten significantly worse.

Today we are closer than ever to getting it done. But I know Senator KENNEDY agrees that it should not have taken more than 30 years for Truman’s call to compel his echo, that it should not have taken another 30 years for us to come as far as we have today. And I know we cannot afford to wait another 30 years—or even 1 more year—to act.

But for some, more than 60 years of work to stabilize health care for those who have it and secure it for those who don’t is “rushing it.”

Someone who was born when Harry Truman first called for reform in 1945, but lived his or her entire life without the ability to afford health care as it got more and more expensive every year, would today—finally—be just months away from becoming eligible for Medicare. I don’t think that’s “rushing it.”

For too many, the interests of the insurance rackets still outweigh the interests of the American people.

The difference is that those of us who know we cannot wait any longer know that the American people must come first.

Those who oppose the reform we so desperately need like to talk about it in the abstract.

They use code words, scare tactics and sound bites. They rely on misinformation—like the myth that your government wants to control your health—and misrepresent the real issues.

But reforming health care is not about the abstract, because health care isn’t just theoretical. Neither is it about rhetoric or politics. It is about people.

Unlike just about any issue we debate and discuss in this body, health care affects every single living, breathing American citizen.

So I find it curious that in the weeks and months we have talked about

health care this year, I haven’t heard our opponents say a single word about real families with real problems—families with real diseases, real medical bills and real fears.

This is what health care is about: It is about people like Lisa, in Gardnerville, NV. Lisa lost her job and with it her health care. Now she can’t afford to take her sick daughter to the doctor to find out why she gets seizures.

It is about people like Braden in Sparks, NV. Braden owes a hospital \$12,000 for a trip to the emergency room—the only place he could afford to go for medical care because he doesn’t have health insurance.

It is about people like Alysia from Las Vegas, NV. Alysia has suffered with a kidney disease since birth, but she can’t get coverage because in the language of the insurance business, her lifelong disease is a preexisting condition.

It is about people like Steve in Henderson, NV. No health insurance company will cover Steve because he has Parkinson’s disease. That doesn’t just mean he can’t get the care he needs to help him cope with this terrible illness—it also means that if Steve gets the flu, or breaks his arm or needs a prescription, he can’t afford any medicine or treatment at all.

It is about people like Caleb, a high school student from outside Reno, NV. Caleb was born without legs, and needs new pairs of prosthetics as he grows bigger in his teen years. But his insurance company has decided it knows better than Caleb’s doctors, and has decided that last year’s legs will have to do.

When we say we are fighting for health care reform that lowers costs, we aren’t talking about a balance sheet—we are talking about people like Lisa, Braden, Alysia, Steve and Caleb.

When we say we are fighting for reform that brings security and stability back to health care, we aren’t talking about policies and contracts—we are talking about people like Lisa, Braden, Alysia, Steve and Caleb.

When we say we are fighting for reform that will no longer let insurance companies use preexisting conditions as an excuse to deny you the coverage you need, we aren’t talking about fine print—we are talking about people like Lisa, Braden, Alysia, Steve and Caleb.

We are talking about the hundreds of thousands just like them across Nevada, and the millions like them across the country.

This cannot be about politics. This must be about them.

Nearly half a century ago, America fearlessly confronted the most confounding medical and economic issue of its day. And a former Senate majority leader reminded us that we must resist the temptation to let the legislation on the written page distract us from its application in the real world. We were asked to look beyond policy and look instead to the people it affects.

It was 44 years ago today—July 30—that President Johnson signed into law the bill that would create the Medicare Program. And on this day in 1965, in Truman’s hometown and with the former President at his side LBJ said the following:

Many men can make many proposals. Many men can draft many laws. But few have the piercing and humane eye which can see beyond the words to the people that they touch.

Few can see past the speeches and the political battles to the doctor over there that is tending the infirm, and to the hospital that is receiving those in anguish, or feel in their heart painful wrath at the injustice which denies the miracle of healing to the old and to the poor. And fewer still have the courage to stake reputation, and position, and the effort of a lifetime upon such a cause when there are so few that share it.

But it is just such men who illuminate the life and the history of a Nation.

Today, each of us can be that leader. We each can fulfill the vision of Harry Truman and Lyndon Johnson—each of whom brought honor to this Senate chamber—and of TED KENNEDY, who still does.

Today, if we can each look past our partisan passions and see the patients, the parents, the people who need our help, we can once again renew the life and history of America, and of all Americans.

ENERGY AND WATER APPROPRIATIONS

Mr. KYL. Mr. President, I rise today to speak on my amendment to the fiscal year 2010 Energy and Water Appropriations bill.

This amendment prevents the Department of Energy from spending taxpayer dollars on companies that invest significant resources or do business in Iran’s energy sector to fill the Strategic Petroleum Reserve.

Earlier this year, the Department signed contracts with energy giants Shell, Vitol, and Glencore to add almost 17 million barrels to the Strategic Petroleum Reserve. Open source material indicates that these three companies make up a majority of Iran’s gasoline imports.

Companies that sell gasoline to Iran should not receive the support of the American taxpayers, and this body has now gone on record multiple times opposing government contracts with companies that have substantial investment in or do business with Iran’s energy sector.

My amendment does not penalize the Department of Energy for this activity, but prevents this sort of thing from happening again. Ending taxpayer support for Iran’s energy sector is a commonsense step and crucially important. Most major importers of gasoline to Iran have substantial ties to the U.S. Government, and unanimous adoption of my amendment sends a clear message to those involved in Iran’s energy sector: You can do business with us, or you can do business with Iran—not both.